

Nurses have many friends: the American public is generous and would subscribe enough to start it if they saw the advisability of doing so, and we—nurse superintendents and all interested in the education of the nurse—are the ones who should show them the importance of taking up this work. It is really a duty which we owe to pupil nurses.

This all sounds very crude, I do not doubt, and needs working out, but if we will only make the effort, it can be brought about. If we can get a small endowment, a few of the right women as its teaching staff, and a few pupils, the start is made. Its success, of course, will depend upon the ability and enthusiasm of its teachers and the support of the nursing profession. If a central place be chosen for the college, the domestic science schools I am sure can be prevailed upon to help out, possibly the medical colleges for some subjects.

For the teaching of the actual methods of nursing all that is necessary is to have the sick, and the sick abound in the large cities. I do hope other superintendents may feel as I do and be willing to at least consider this matter, and see if there is not something in it.

M. HELENA McMILLAN.

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DEAR EDITOR: I note in the Report of the Fifth Annual Convention, held in Chicago, Ill., May 1, 1902, that Miss Lathrop, in her address of welcome, stated that there is in this country and abroad an active effort to place cases of acute mental disorder in the category of general hospital cases, and thus under the care of trained nurses.

I do not wish to criticise said address or the prevailing tendency to further and promote this innovation, but I would like to call attention to the expediency of carefully considering this problem before a definite conclusion has been reached in that direction, or until the present existing phase has been viewed in its true light.

Some of the disadvantages from a private hospital stand-point are as follows:

First. The lack of spacious grounds, which are so essential for recreation, fresh air, and sunshine.

Second. The financial aspect should be taken into consideration. The additional expense incurred in the erection of a private hospital, with thick and impenetrable walls, suitable for insane patients, would, in most cases, exceed the means of the most sanguine advocate, double-hearted as he may be, but single-handed.

Third. They have no facilities for entertaining and diverting the deluded minds of the insane, which is one of the primal features in the training of attendants in hospitals for the insane.

Fourth. This is an age of specialties. The physicians and attendants who devote their time exclusively to acute nervous diseases can with a greater degree of intelligence meet the demands and combat the obstacles that are sure to confront them every hour in the care and observance of acute mental complications.

From the personal experience which the writer has had, having graduated from a large private hospital training-school for nurses, and afterwards having been superintendent of nurses in a State insane hospital, she would say that the *modus operandi* of care and the treatment of cases and the private hospital regime and insane routine are vastly separate and distinct, and that if the two were combined and the outcome of the work noted carefully, we should soon reap the perilous catastrophes occasioned by such intermingling of patients.

The other side we will consider for a moment.

A medical and surgical hospital should be free from noise and everything tending to promote and occasion excitement; hence, unless windows were securely barred and doors locked the medical and surgical patients would be found laboring under an impending dread continually of being visited or attacked by some of those poor, unfortunate acute mental victims, who are by nature of their disease prone to make escape or attack someone.

In conclusion, I believe there will be manifold obstacles to surmount before the acme of such a combine can bud and ripen into the practicability of consigning insane patients to the care and keeping of private hospital domains.

BESSIE BANNISTER.

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DEAR EDITOR: Having read your JOURNAL with interest during the past six months, and enjoying the information afforded, I would be pleased if you could give space sometime for a little explanation of the following. During the past spring in the vicinity where I reside a severe case of pneumonia was treated by the serum treatment. The patient recovered after a long convalescence. Very bad abscesses formed after the injection of the fluid.

Not having used the treatment in my practice yet, I would like to know something about it. Does it always cause the formation of abscesses? Does it act on the lungs directly? Are there heart complications to be watched for?

ALICE HEATLEY,

Nurse in charge of McKean County Home, Smethport, Pa.

[REPLY]

Pneumotoxin has been used in pneumonia in an experimental way for the last two or three years with rather doubtful results, about the same proportion of recoveries occurring with the use of the serum as without it. The majority of opinions is rather against its use, although, owing to the fact that the introduction of the serum does not interfere with the use of other remedies, those objecting do not urge their objection very strongly.

The serum is expensive and difficult to obtain, the process being somewhat similar to that used in producing the diphtheria antitoxin.

When given it is in the quantity of twenty-two cubic centimetres injected subcutaneously, repeated every six to eight hours until a marked change for the better occurs. Frequently one dose is sufficient, while at times three or four must be given.

Some authorities claim that the introduction of the serum counteracts the toxic effects of the germ, others that it acts directly on the germ itself.

Abscesses should not follow the introduction of the serum, and if such occur, they are probably caused by the impurities in the serum or, which is much more likely, to an imperfect technique and lack of cleanliness at the time of injection.

No heart complication arises from its correct use.

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27 LARGO IL MIGNONE, FLORENCE, ITALY, June 2, 1902.

DEAR EDITOR: In this month's JOURNAL on page 686 I find a cure given for warts, and it occurs to me that some of your readers may be glad to know of another and very simple treatment the efficacy of which I can vouch for. From some friend or other I had been told of this cure, and having, in our Medical Mission surgery, a bad case of warts on the hand, for which all the caustic appli-